

CLAIMS ONLY							Application Number 10657019		Filing Date			
							Applicant(s)					
* May be used for additional claims or amendments												
CLAIMS	AS FILED 6-26-06		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9		2					59					
10		2					60					
11	1						61					
12							62					
13							63					
14							64					
15							65					
16							66					
17							67					
18							68					
19							69					
20		2					70					
21		2					71					
22		2					72					
23		2					73					
24		2					74					
25		2					75					
26		2					76					
27							77					
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39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	2						Total Indep					
Total Depend	33						Total Depend					
Total Claims	35						Total Claims					